

## Town Of Sterling Select Board

Permit #

Permit Fee: \$25.00

Fee Paid:

**Expiration Date:** 

## **VENDOR PERMIT APPLICATION**

Name of Business or Orga	ınization:
Person Responsible for Per	rmit:
Address:	Mailing Address:
City or Town:	Phone:
Email:	
Location (address) and Ph	one Number where permit is to be used
Purpose of Permit: (Type of Date(s) Permit is to be use	
Signature of Licensee	Print Name
F.I.D. OR Social Security Number	Date